

**Department of Public Health and Social Services  
Division of Environmental Health  
Food Establishment Inspection Report**

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INSPECTION	RSN	TYPE	GRADE	INSPECTION DATE	ESTABLISHMENT NAME
Regular		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	9/14/17	IPPE SHELL FOODY'S (MICRO MALL)
Follow-up				TIME IN	TIME OUT
Complaint	<input checked="" type="checkbox"/>		RATING	9:20 AM	12:30 AM
Investigation			A	SANITARY PERMIT NO.	PERMIT HOLDER
Other:				17000 2451	IPPE HOLDINGS, LLC
ESTABLISHMENT TYPE				AREA	TELEPHONE
RETAIL				3	979-1133
				No. of Risk Factor/Intervention Violations	RISK CATEGORY
				0	2
				No. of Repeat Risk Factor/Intervention Violations	NA

**FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS**

Circle designated compliance (IN, OUT, N/O, N/A) for each numbered item. Mark "X" in appropriate box for COS and/or R.

IN = In compliance OUT = Not in compliance N/O = Not observed N/A = Not applicable COS = Corrected on-site during inspection R = Repeat violation PTS = Dement points

Compliance Status			COS	R	PTS
<b>Supervision</b>					
1	IN OUT	Person in charge present, demonstrates knowledge, and performance duties			6
<b>Employee Health</b>					
2	IN OUT	Management awareness; policy present			6
3	IN OUT	Proper use of reporting, restriction & exclusion			6
<b>Good Hygienic Practices</b>					
4	IN OUT N/A N/O	Proper eating, tasting, drinking, betelnut, or tobacco use			6
5	IN OUT N/A N/O	No discharge from eyes, nose, and mouth			6
<b>Preventing Contamination by Hands</b>					
6	IN OUT N/A N/O	Hands clean and properly washed			6
7	IN OUT N/A N/O	No bare hand contact with ready-to-eat foods or approved alternate method properly followed			6
8	IN OUT	Adequate handwashing facilities supplied & accessible			6
<b>Approved Source</b>					
9	IN OUT	Food obtained from approved source			6
10	IN OUT N/A N/O	Food received at proper temperature			6
11	IN OUT	Food in good condition, safe, and unadulterated			6
12	IN OUT N/A N/O	Required records available: shellstock tags, parasite destruction			6
<b>Protection from Contamination</b>					
13	IN OUT N/A	Food separated and protected			6
14	IN OUT N/A	Food contact surfaces: cleaned & sanitized			6
15	IN OUT	Proper disposition of returned, previously served, reconditioned, and unsafe food			6
<b>Potentially Hazardous Food (TCS Food)</b>					
16	IN OUT N/A N/O	Proper cooking time and temperatures			6
17	IN OUT N/A N/O	Proper reheating procedures for hot holding			6
18	IN OUT N/A N/O	Proper cooling time and temperature			6
19	IN OUT N/A N/O	Proper hot holding temperatures			6
20	IN OUT N/A	Proper cold holding temperatures			6
21	IN OUT N/A N/O	Proper date marking and disposition			6
<b>Consumer Advisory</b>					
22	IN OUT N/A	Consumer Advisory provided for raw or undercooked foods			6
<b>Highly Susceptible Populations</b>					
23	IN OUT	Pasteurized Foods used; prohibited foods not offered			6
<b>Chemical</b>					
24	IN OUT N/A	Food additives: approved and properly used			6
25	IN OUT	Toxic substances properly identified, stored, used			6
<b>Conformance with Approved Procedures</b>					
26	IN OUT N/A	Compliance with variance, specialized process, and HACCP plan			6

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health interventions are control measures to prevent foodborne illness or injury.

**GOOD RETAIL PRACTICES**

Good Retail Practices are preventative measures to control the introduction of pathogens, chemicals, and physical objects into foods.

Mark "X" in box: If numbered item is not in compliance and/or if COS and/or R. COS =Corrected on-site during inspection R=Repeat violation PTS =Dement points

Compliance Status			COS	R	PTS
<b>Safe Food and Water</b>					
27		Pasteurized eggs used where required			1
28		Water and Ice from approved source			2
29		Variance obtained for specialized processing methods			1
<b>Food Temperature Control</b>					
30		Proper cooling methods used; adequate equipment for temperature control			1
31		Plant food properly cooked for hot holding			1
32		Approved thawing methods used			1
33		Thermometer provided and accurate			1
<b>Food Identification</b>					
34		Food properly labeled; original container			1
<b>Prevention of Food Contamination</b>					
35		Insects, rodents, and animals not present			2
36		Contamination prevented during food preparation, storage & display			1
37		Personal cleanliness			1
38		Wiping cloths: properly used and stored			1
39		Washing fruits and vegetables			1
<b>Proper Use of Utensils</b>					
40		In-use utensils: properly stored			1
41		Utensils, equipment and linens: properly stored, dried, handled			1
42		Single-use/single-service articles: properly stored, used			1
43		Gloves used properly			1
<b>Utensils, Equipment and Vending</b>					
44		Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used			1
45		Warewashing facilities: installed, maintained, used, test strips			1
46		Nonfood-contact surfaces clean			1
<b>Physical Facilities</b>					
47		Hot & cold water available, adequate pressure			2
48		Plumbing installed; proper backflow devices			2
49		Sewage and wastewater properly disposed			2
50		Toilet facilities: properly constructed, supplied, & cleaned			2
51		Garbage/refuse properly disposed, facilities maintained			2
52		Physical facilities installed, maintained, and clean			1
53		Adequate ventilation and lighting; designated areas use			1

I have read and understand the above violation(s), and I am aware of the corrective measures that shall be taken.	
Person in Charge (Print and Sign) <i>Jeannette Suzuki</i>	Date: <i>9/14/17</i>
DEH Inspector (Print and Sign) <i>James Carr</i>	Follow-up (Circle one): YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> Follow-up Date <i>N/A</i>

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ESTABLISHMENT NAME <u>1 P &amp; E SHELL FOODY'S (MICAU MAIL)</u>		LOCATION (Address) <u>LOT 5049-2-R5 #1355 ROUTE 1 N. MAKING CORP DR.</u>
INSPECTION DATE <u>9/14/17</u>	SANITARY PERMIT NO. <u>170002951</u>	PERMIT HOLDER <u>1PEE HOLDINGS, LLC</u>

TEMPERATURE OBSERVATIONS

Item/Location	Temperature (° F)	Item/Location	Temperature (° F)
EMPANADA / WARMER	140.0	HOT OIL / LARGE CHILL UNIT	31.5
CLAM CHURDER / WARMER	155.0	ARROZ CALDO / REHEAT	
SIOPAO / STEAMER	162.5		73.0 @ 9:30am
BORCHIX / OPEN WARMER	140.0		132.5 @ 9:45am
PANCIT 1 " "	110.0		
CHIX / " "	141.0		
ARROZ CALDO / WARMER	167.5		
CHIX CARBON / OPEN CHILLER	41.5		
HOT OIL / HOT OIL WARMER	155.0		

ITEM NO.	OBSERVATIONS AND CORRECTIVE ACTIONS	CORRECT BY DATE
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Violations cited in this report must be corrected within the time frames indicated, or as stated in Sections 8-405.11 and 8-406.11 of the Guam Food Code.

	A REGULAR INSPECTION WAS CONDUCTED BASED ON COMPLAINT # 17-017 REGARDING SPOILED SOUP PURCHASED FROM THE ESTABLISHMENT. NO PREVIOUS INSPECTION WAS CONDUCTED.	
	THE FOLLOWING WAS OBSERVED:	
	NO EVIDENCE OF SPOILED SOUP WAS FOUND DURING INSPECTION.	
#19	PANCIT BEING HOT HELD AT 110°F.	
	ALL PHE/TCS FOODS SHALL BE HOT HELD AT 140°F OR ABOVE TO PREVENT BACTERIAL GROWTH	
*COS:	PANCIT WAS DISCARDED.	
	"A" PLACARD # 03027 ISSUED	
	BRIEFED PIC JEANETTE SUZUKI ON ABOVE	

Based on the inspection today, the items listed above identify violations which shall be corrected by the date specified by the Department. Failure to comply may result in further regulatory actions. If seeking to appeal the result of this inspection, a written request for hearing must be submitted to the Director before the indicated correction date.

Person In Charge (Print and Sign) <u>JEANETTE SUZUKI</u>	Date: <u>9/14/17</u>
DEH Inspector (Print and Sign) <u>JAMES CARL FUR</u>	Date: <u>9/14/17</u>